SHARRON ANGLE ASSEMBLY				29	
Candidate's Name (print)		Office	District (if applicable)		
1802 Rainbow Ridge Rd., Reno, NV 895	23			'775-787-6017	
Mailing Address (include city and zip code)		Telephone Number			
7*3 .1	CDODT NUMBER 2	DUE OCTOBER	. 24 20	6 00 🏞	
K	EPORT NUMBER 2	- DUE OCTOBER	31, 20		
		egins: August 24, 2000 nds: October 25, 2000		**************************************	
				A STATE OF THE STA	
	CONTRIBUT	TIONS SUMMARY			
1. From Report Numb	per 1, total amount of contribution	ons in excess of \$100	· · · · · · · · · · · · · · · · · · ·	20,399.58	
2. From Report Number 1, total amount of contributions of \$100 or less			4,117.00		
3. Report Number 2, amount of contributions in excess of \$100			13,700.00		
4. Report Number 2, total amount of contributions of \$100 or less		_	2,592.00		
From Report N	umbers 1 and 2, actual number	of			
contributions of	f \$100 or less175				
5. Interest and income earned, if any, during this report period			1.47		
6. Total amount of a	II contributions				
(add lines 1 through 5)			40,810.05		

EXPENSES SUMMARY

7. From Report Number 1, total amount of expenses in excess of \$100	23,120.61
8. From Report Number 1, total amount of expenses of \$100 or less	1,395.97
9. Report Number 2, total amount of expenses in excess of \$100	4,747.56
10. Report Number 2, total amount of expenses of \$100 or less	
11. TOTAL AMOUNT OF ALL EXPENSES	
(add lines 7 through 10)	29,264.14

If no contributions or expenses are listed during this Report Period, only this page of the report needs to be filed with your filing officer.

I declare under penalty of perjury that the foregoing is true and correct.

Signature of Candidate

Total number of pages for this report 6